**UPDATE on** PHT Neuro-Spinal Service Referral Restrictions

Subject to final sign-off by NHSE/NHSI, we are working with Plymouth Hospitals NHS Trust (PHT) towards an anticipated list closure from Monday 18 April 2016. This will enable PHT to close its waiting list for a year to new patients who need assessment and surgery for complex spinal conditions.

Full detail of the changes in access criteria are set out in the attached guidance, but in summary:

- patients already waiting for an out-patient appointment or for routine surgery will continue to be treated at Derriford
- emergency referrals for patients from across the South West will continue to be accepted at Derriford
- An alternative provider, Ramsay Health Care, has been secured to accept newly-referred patients.
- Out-Patient appointments and minor procedures will be done locally and patients will be seen in the Plymouth area or in Truro
- For patients subsequently needing a surgical intervention, at the present time this will be undertaken at New Hall in Salisbury. Help with travel costs will be in line with local CCG policy.
- NHSE is working with the provider to have surgery carried out more locally, in Devon and Cornwall.

Where a patient is not eligible for referral into the neuro-spinal service, they will require further guidance from their GP.

The purpose of the service restriction is to enable PHT to bring down its waiting list, which has grown due to a build-up of demand. A review has also been commissioned by NHS England in the South West of the pathway for complex spinal conditions. This is designed to identify why the surgical backlog has built up and how patients should be managed in future.

**Please note the following information:**

*Appendix 1: PHT Spinal Service - Revised Referral Criteria*
*Appendix 2: DRSS Triage Process*
*Appendix 3: RMS Triage Process*

If you have any queries or require any further information, please contact Amanda Cooper, Specialised Commissioning – NHS England South – Email: amanda.cooper20@nhs.net
South West Neurosurgery Spinal Service - Revised Referral Criteria

The Neurosurgery Service does not at present accept the following referrals:

- New elective spinal patient referrals

The Neurosurgery Service will continue to accept referrals from primary and secondary care providers for:

- Cranial pathology
  - this service will remain unaffected – ALL elective, urgent and emergency cranial referrals will be accepted

- The full range of urgent and emergency spinal referrals
  - all spinal tumours/suspected spinal tumours
  - spinal trauma
  - spinal infection
  - suspected cauda equina syndrome - these patients should be urgently referred to their local emergency department as currently
  - urgent cases with deteriorating neurological status:
    - Established or Incomplete Cauda Equina Syndrome
    - Myelopathy
    - Spinal degenerative pathology with motor deficit
    - Spinal pathology with sphincter disturbance

- unremitting pain requiring hospital admission with radiologically demonstrable and surgically remediable pathology

(Neurosurgery will continue to not accept referrals for patients with acute back pain in the absence of "red flag" signs or symptoms.)
DRSS – booking process for PHT Neuro-Spinal Patients After Partial List Closure

GP raises UBRN on eRS and books into DRSS

MRI Yes- book into Ramsay Health assessment service on eRS

DRSS review- is MRI scan attached?

If UBRN raised before 11th April book into Derriford MDT

If red flag shortlist for Derriford

No MRI- return to GP practice

Ramsay assess referral letter within 48 hours

Suitable for Out-Patients

Yes- DRSS shortlist Ramsay on eRS

Patient phones DRSS. DRSS use script to inform patient that while the Out-Patient appointments and Minor Procedures will be locally provided (Truro and Plymouth) if surgery is required that will be undertaken at New Hall, Salisbury.

Book patient into Out-Patient clinic

Booking of Out-Patient appointment triggers a confirmation letter with reminder to patient that surgery is in Salisbury

No-Ramsay provide information for GP on eRS and DRSS return to practice

Suitable for Out-Patients

Nb. If following Out Patient appointment, the patient requires surgery but does not meet the Ramsay surgery criteria then Ramsay will outsource.
Proposed process for RMS management of Neurosurgery referrals from 18th April 2016

GP books into NHS Kernow assessment service

PCA triages referral to ensure MRI attached

PCA creates 2nd UBRN and books referral into Ramsay assessment service

Ramsay assess referral

Surgery required

Ramsay use the ‘reject’ option on ERS to return the referral back to the RMS, advising that the RMS book an appointment for the patient

Referral is picked up by RMS and the PCA then phones the patient to offer choice of appointment

Surgery not required

Ramsay ADVISE REFERRER on ERS with information for the GP (goes back to GP practice)

Kernow RMS Contact Details:

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Exclusions

The PHT Neurosurgery Service will continue to accept referrals from primary and secondary care providers for:

- **Cranial pathology**
  - This service will remain unaffected – ALL elective, urgent and emergency cranial referrals will be accepted

The full range of urgent and emergency spinal referrals:

- All spinal tumours/suspected spinal tumours
- Spinal trauma
- Spinal infection
- Suspected cauda equina syndrome - these patients should be urgently referred to their local emergency department as currently
- Urgent cases with deteriorating neurological status:
  - Established or incomplete cauda equina syndrome
  - Myelopathy
  - Spinal degenerative pathology with motor deficit
  - Spinal pathology with sphincter disturbance
- Unremitting pain requiring hospital admission with radiologically demonstrable and surgically remediable pathology